RECEIPT NUMBER	DATE (MO / DAY)	RESPONSIBLE PARTY	ADDRESS	PATIENT / RELATIONSHIP	AMOUNT	RECEIVED BY
1960	2 / 7 / 64	Arline W. McKnight	Blue Cross thru March 31, 1964		119.70	[illegible]

HEBER CLINIC and HOSPITAL

84 South 1st West
HEBER CITY, UTAH

№ 1960

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